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ABSTRACT

Growing interest in self-presentation has spawned several examinations of individual differences in the tendency to manage one's impressions, notably Snyder's attempt to identify skilled impression managers through self-monitoring and an associated monitoring device, the Self-Monitoring Scale (SMS). To further examine the SMS, factor analyses were conducted and revealed a factor that could be interpreted as tapping social anxiety. This factor caused persons identified as high or low self-monitors on the basis of extreme score selection criteria to be low and high, respectively, in social anxiety. Four experiments demonstrated that social anxiety may account for low self-monitors' self presentational behaviors in highly socially evaluative situations. These findings indicate that the confounding of self-monitoring and social anxiety in the SMS may lead to ambiguous interpretations of research findings. (Author/JAC)

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Social Anxiety, Situational Variability, and the Self-Monitoring Scale

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Social Anxiety, Situational Variability, and the Self-Monitoring Scale

William K. Gabrenya, Jr.

The growing interest in self-presentation has spawned several examinations of individual differences in the predisposition or tendency to manage one's impression, most notably Snyder's (1974) attempt to identify the skilled impression manager through the concept "self-monitoring" and an associated measurement device, the Self-Monitoring Scale (SMS). "Self-monitoring" refers to the concern for and tendency to observe and control one's self-presentation and expressive behavior, including an acute sensitivity to situational cues that might indicate what behavior is appropriate and what is not. The present paper outlines a series of studies that call into question the validity of the SMS and, by extension, the conclusions of some of the associated research (see Snyder, 1979). The SMS is shown to be confounded with social anxiety or sociability, and several studies and internal analyses are reported that demonstrate that this confounding may lead to self-presentational findings inconsistent with Snyder's conceptualization of the self-monitoring construct.

A study of attributions for success and failure conducted by Arkin, Gabrenya, Appelman, and Cochran (1979) reported early findings problematic for the SMS. Individuals who scored in the upper and lower quartiles of the SMS received (false) success or failure feedback while delivering therapeutic "desensitization" instructions to a supposedly test-anxious peer (a confederate). Half of the subjects were videotaped throughout the therapy so that their performance could be "evaluated by experts;" the remaining half were not videotaped. Typical findings in a study of this kind are that subjects take greater responsibility for success than for failure (see Bradley, 1978). To the extent that this attributional bias reflects self-presentational motives we expected

low self-monitors to evidence a weaker bias than high self-monitors because of their apparently lower concern for impression management and their preference for consistency between cognitions held and expressed. More importantly, we expected that the videotape manipulation would have a much weaker effect on the attributions of low self-monitors, because of their supposedly lower sensitivity to situational cues as to appropriate or strategic self-presentation, than on those of high self-monitors. Figure 1a illustrates our predictions for low self-monitors. However, contrary to this theorizing based on Snyder's conception of self-monitoring, low self-monitoring subjects assumed significantly less responsibility for success when they were videotaped than when they were not, and assumed somewhat greater responsibility for failure when they were taped than when they were not (Figure 1b presents these findings.) Thus, low self-monitoring individuals were not consistent in their attributions across evaluation conditions as the original formulation of the self-monitoring construct would predict. High self-monitors tended to report attributions opposite to those of low self-monitors, taking more responsibility for success than for failure in the high evaluation condition. Hence, low self-monitors responded to evaluation by <u>moderating</u> their statements concerning personal responsibility for success.

These rather intriguing findings suggested a closer look at the SMS and the characteristics of people who score high and low on the scale. We performed a factor analysis of the SMS and compared the obtained factors to a number of other well-known personality measures (Gabrenya & Arkin, 1980). Our factor analysis revealed a factor structure similar to those found in a number of other factor analyses available at that time (e.g., Briggs, Cheek, & Buss, 1980). Our correlations of these factors with other individual difference measures led us to suspect that the SMS contained a social anxiety component.

Table 1 presents correlations between the four stable factors that we found and other selected measures. Factor B includes items typically referred to as the "extraversion" factor of the SMS, although a close examination of the correlation matrix reveals that only what Eysenck (Eaves and Eysenck, 1975) refers to as "social extraversion", a subset of the items in the extraversion scale, is related to factor B. The items Eysenck identifies as measuring the impulsivity aspect of extraversion were not related to this factor. Furthermore, although the factor B items seem to tap sociability, (e.g., "in a group of people I am rarely the center of attention"), the factor is correlated equally as strongly with a measure of social anxiety as with one of sociability. Hence, it appears that the SMS does include a social anxiety component as we suspected. The items that load on this factor are scored such that low self-monitors are higher in social anxiety than high self-monitors. Thus, in the Arkin et al. study low self-monitors may have moderated their attributions in the face of social evaluation because of their social anxiety about such close scrutiny, whereas high self-monitors felt no anxiety about such evaluation and may, in fact, have welcomed it.

Given this interpretation of the Arkin et al. study it appears that the social anxiety factor cannot be assumed to operate consistently with the remainder of the SMS or with the self-monitoring construct. Hence,the SMS seems to be confounding social anxiety and other trait dimensions that are said to characterize self-monitoring. The extent of this confounding given the common practice of extreme group selection procedures in research that uses the SMS is illustrated in Table 2. The numbers of introductory psychology students from a pretest sample of nearly 700 who scored in the upper and lower quartiles of the SMS and of an independent measure of social anxiety (Fenigstein, Scheier, & Buss, 1975) are presented. It can be seen that the SMS-social anxiety confound is fairly strong at this selection criterion, $\chi^2 = 12.0$, $p < .001$, notably among low

self-monitors. The chances of selecting a highly socially anxious low self-monitor in this sample are about twice as great as those of selecting a low social anxiety low self-monitor. Not unexpectedly, as the selection criterion becomes progressively more extreme, the chances that subjects characterized as low self-monitors are high in social anxiety continues to increase, as Figure 2 illustrates. SMS selection criteria are on the horizontal axis of this figure and the probabilities of choosing subjects high or low in social anxiety are plotted on the vertical axis. When low self-monitors are defined as those scoring in the 10th percentile on the SMS, the odds of their being high rather than low in social anxiety approach 4 to 1.

Given this apparent confounding of social anxiety and self-monitoring, several other studies were examined for evidence that social anxiety is an important determinant of the kinds of behaviors to which self-monitoring is supposedly relevant and that it may affect those behaviors inconsistently with previous conceptions of self-monitoring.

First, a conceptual replication of the Arkin et al. (1979) study discussed above that employed an identical desensitization therapy task (Arkin, Appelman, and Burger, 1980, Experiment I) demonstrated the potential functional similarity of the SMS and Fenigstein et al.'s social anxiety scale. Both high and low social anxiety subjects in this study reported slightly, but not significantly, more responsibility for success than for failure under low evaluation. However, in the high evaluation conditions, low social anxiety subjects assumed somewhat greater responsibility for success than for failure. In contrast, high social anxiety subjects presented themselves in an exceedingly modest way, assuming significantly more responsibility for failure than for success (see Figure 3). Hence, both <u>high social anxiety</u> subjects in this latter study and <u>low self-monitors</u> in the Arkin et al. (1979) study took into account expected social evaluation and did so by moderating their personal attributions for success.

We sought additional corroborating evidence for this relationship between social anxiety, specifically, the social anxiety factor of the SMS, and self-presentation in internal analyses of two studies that used subjects for whom raw SMS pretesting data were available. A strong case for the problematic influence of the social anxiety factor in the SMS would be made if it were found that this factor is correlated with self-presentational behavior in a fashion opposite to that predicted by the self-monitoring construct.

Pretest SMS data were partly available for the social anxiety study just discussed (Arkin, Appelman, and Burger, 1980, Experiment I). Based on our previous social anxiety findings, we expected to find a negative correlation between scores on the SMS social anxiety factor and self-attributions in the success/high evaluation condition of the study. In other words, the greater a subject's social anxiety, the more modest the subject will be about taking responsibility for success if he or she expects to be evaluated. We expected a positive correlation in the failure/evaluation condition according to the same logic. The higher a subject's social anxiety, the more the subject will take responsibility for failure if he or she expects to be evaluated. These relationships between social anxiety and self-attributions should be greatly reduced in the low evaluation condition. Table 3 presents these predictions and the obtained correlations. Despite the low cell frequencies, the results generally supported our predictions. The correlation between social anxiety and self-attribution in the success/evaluation condition was $-.72$ ($df = 8$, $p < .05$), whereas in the failure/evaluation condition it was .07, n.s. The difference between these two correlations is significant, $z = 1.76$, $p < .05$ (one-tailed). In the no-evaluation condition the correlations did not approach significance, as predicted. Corresponding correlations based on the balance of the SMS items were neither significantly different from zero nor from one another, suggesting that social anxiety, and not self-monitoring, was uniquely responsible for the effect.

An experiment concerning anticipatory belief change, similarly conducted during a semester in which pre-test SMS scores were collected, was also re-analyzed. Anticipatory belief change refers to the finding that individuals tend to change their attitudes in anticipation of receiving a persuasive communication, and appears to be best understood in terms of impression management (Cialdini, Levy, Herman, Kozlowski, and Petty, 1976; Hass & Mann, 1976). The primary evidence for this interpretation is that subjects in anticipatory belief change studies tend to change their attitudes toward a more moderate position but that this new position is not "internalized;" subjects return to their original position if they are informed that the communication had to be cancelled. Turner (1977) found that high social anxiety subjects exhibited anticipatory belief change but that low social anxiety subjects did not, and speculated that individuals high in social anxiety shifted their opinions towards those of the communicator's in order to avoid appearing argumentative and becoming the object of public attention.

The present study employed a methodology similar to Turner (1977). Subjects were told that they would hear a speech maintaining that a cure for cancer was still only a distant possibility. Previous research has shown that undergraduates hold the opposite opinion (Turner, 1977). After being informed of the nature of the speech they would hear, subjects filled out a questionnaire that included a measure of agreement with the argument to be heard and a measure of ego-involvement in the communication topic (whether or not a family member or friend had had cancer). As expected, subjects' scores on the social anxiety factor of the SMS were highly correlated with belief moderation for the low ego-involvement subjects, $r(16) = -.51$, $p < .05$, conceptually replicating Turner's findings. In other words, the higher a subject's social anxiety, the more he or she backed off from his or her originally expressed opinion in anticipation of the counter-attitudinal message. The

social anxiety factor did not mediate belief moderation for high ego-involvement subjects, $r(20)=-.14$, n.s., consistent with previous findings (Cialdini et al., 1976). The relationship of the balance of the SMS items to belief moderation was low in the high ego-involvement condition, $r = -.33$, n.s., but the entire Self-monitoring Scale was moderately correlated with belief moderation, $r(16) = -.47$, $p < .06$. Hence, low self-monitors moderated their opinions more than did high self-monitors, and this reversal of the expected self-monitoring effect seems to have been largely due to the social anxiety factor of the scale.

To summarize these findings, low self-monitors seem to regulate their behavior according to cues about appropriate self-presentation to a greater extent than one would expect on the basis of Snyder's conception of the self-monitoring construct, and social anxiety or sociability seems to be implicated as the causal agent. This confounding of social anxiety with other traits of the SMS may be most apparent and problematic in experimental contexts such as those utilized in the studies reported here that induce a good deal of evaluation apprehension. Thus, it appears that in such highly evaluative situations low as well as high self-monitors may exhibit self-presentation, but that the content of this impression management will differ. Highly socially anxious low self-monitors may seek to present themselves in a modest, unobtrusive fashion in order to avoid potential disapproval or embarrassment that would result from attracting the attention of others. Low socially anxious high self-monitors may self-present in the opposite fashion, seeking attention that they are confident will lead to social approbation.

There are two major implications of these data. First, these findings point to social anxiety or sociability as an important individual difference factor influencing self-presentation style or strategy. Second, these findings suggest that individuals interested in investigating the influence of self-

monitoring per se should eliminate the items identified as reflecting introversion-extraversion, sociability, or social anxiety prior to selecting subjects (especially if the investigator is selecting subjects from the extremes of the SMS distribution) in that these items: 1) seem theoretically and empirically unrelated to the concept of self-monitoring, and 2) affect self-presentational behavior in a manner that may run counter to hypotheses derived from the self-monitoring concept if the context is one in which an individual can expect high social evaluation.

In conclusion, although self-monitoring is certainly an interesting concept, and research employing the SMS produces increasingly interesting findings, these findings are unfortunately subject to the qualifications implied by the social anxiety confound treated here. More generally, the SMS seems to be multidimensional in such a way that it does not satisfactorily correspond to the original construct, and at least one of these dimensions has behavioral effects that under certain circumstances run counter to the construct. Hence, we are left in a situation in which otherwise intriguing experimental findings can be attributed to one or more of the several "constituent traits" that seem to comprise self-monitoring as it is currently measured. Whereas the social anxiety factor may come into play in situations involving social evaluation, other SMS factors may be influential in other situations that involve social perception, interpersonal skills, or values concerning manipulation or deception of others. Perhaps our understanding of individual differences in each of these social behaviors would be enhanced by turning from the use of a global self-monitoring concept and measure to a set of more specific personality constructs and measures, one example being social anxiety.

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TABLE 1

CORRELATIONS BETWEEN SELF-MONITORING SCALE FACTOR SCORES AND SELECTED PERSONALITY MEASURES[1]

PERSONALITY MEASURE	SELF-MONITORING SCALE FACTOR				
	A ACTING ABILITY	B SOCIAL ANXIETY	C/D OTHER ORIENTATION	E VERBAL ABILITY	SELF-MONITORING SCALE
EYSENCK PERSONALITY INVENTORY[A]					
EXTRAVERSION	.27	.44	.02	.11	.38
SOCIABILITY	.20	.56	-.04	.10	.38
IMPULSIVITY	.22	.12	.06	.05	.27
NEUROTICISM	.08	-.30	.18	-.16	.16
SELF-CONSCIOUSNESS SCALE[B]					
SOCIAL ANXIETY	-.24	-.50	.10	-.18	-.22
PRIVATE SELF-CSNESS	.17	-.01	-.05	-.03	.11
PUBLIC SELF-CSNESS	.07	-.04	.15	-.13	.14
SELF-MONITORING SCALE[B]	.60	.40	.31	.23	--

[A]N=690 [B]N=1507

[1]CORRELATIONS ARE UNWEIGHTED AVERAGES OVER SEX.

TABLE 2

FREQUENCIES OF PRETESTED INTRODUCTORY PSYCHOLOGY STUDENTS IN THE UPPER AND LOWER QUARTILES OF THE SELF-MONITORING SCALE AND THE SOCIAL ANXIETY SCALE[1]

	SELF-MONITORING	
SOCIAL ANXIETY	HIGH	LOW
HIGH	55	76
LOW	64	35

[1]TABLE ENTRIES ARE FREQUENCIES. SOCIAL ANXIETY SCALE IS THE SOCIAL ANXIETY SUBSCALE OF THE FENIGSTEIN ET AL. (1975) SELF-CONSCIOUSNESS SCALE.

TABLE 3

CORRELATIONS BETWEEN THE SOCIAL ANXIETY SMS FACTOR AND SELF-ATTRIBUTIONS FOR OUTCOME UNDER HIGH AND LOW EVALUATION[1]

		LEVEL OF EVALUATION	
THERAPY OUTCOME		HIGH	LOW
SUCCESS	PREDICTED	NEGATIVE	LOW
	OBTAINED	-.72* (9)	-.11 (10)
FAILURE	PREDICTED	POSITIVE	LOW
	OBTAINED	.07 (10)	-.08 (9)

[1]BASED ON DATA FROM ARKIN, APPELMAN, AND BURGER (1980, EXPERIMENT I).

*P<.05

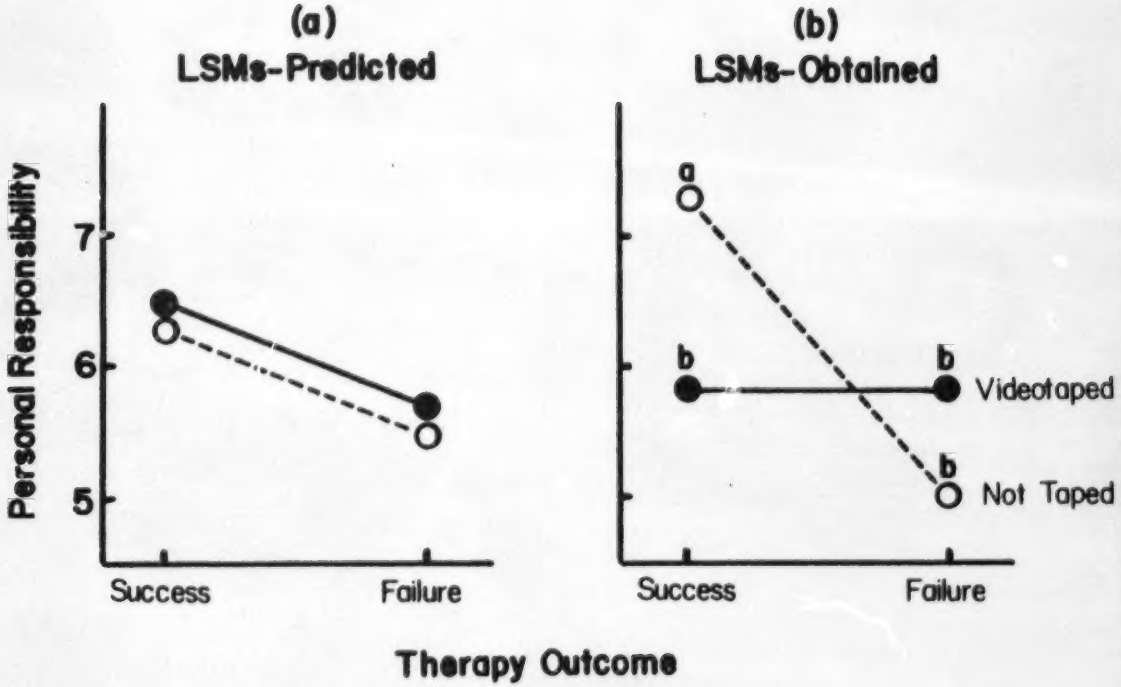

Figure 1. Predicted and obtained low self-monitor findings from Arkin, Gabrenya, Appelman, and Cochran (1979).

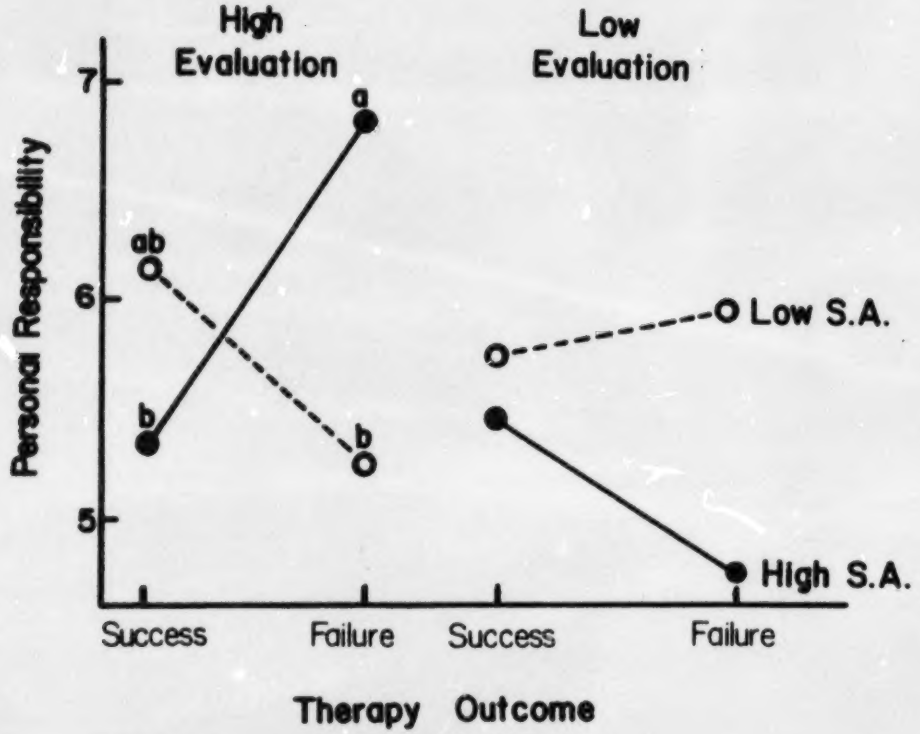

Figure 3. Attributions of personal responsibility for success and failure by high and low social anxiety subjects under high or low expected evaluation. Data are from Arkin, Appelman, and Burger (1980, Experiment 1).

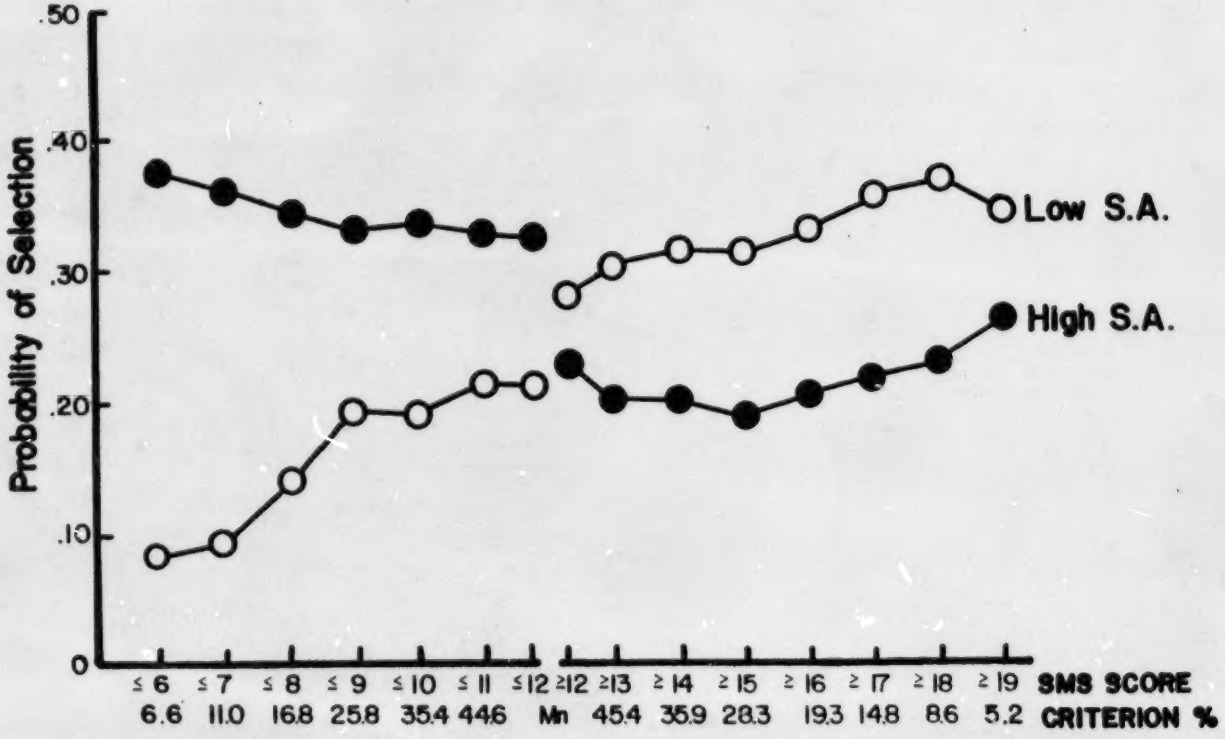

Figure 2. Probabilities of obtaining high and low social anxiety subjects as a function of selection criteria on the Self-Monitoring Scale. High and low social anxiety subjects scored in the upper and lower quartiles of the social anxiety subscale of the Self-Consciousness Scale (Fenigstein et. al., 1975.